

**APPLICATION FOR RENEWAL OF ESCROW AGENCY LICENSE
(Principal Location)**

Mail to: Division of Mortgage Lending
400 W. King Street, Suite 101
Carson City, NV 89703

The undersigned hereby makes application to the Commissioner of the Division of Mortgage Lending for renewal of a license to engage in the Escrow Agency business.

YOUR LICENSE WILL EXPIRE ON JULY 1.
THERE IS NO 'GRACE PERIOD' FOR LATE RECEIPT OF RENEWAL FEES.

1. Required Items:

- A. Documentary support evidencing average balance of trust accounts for six months to verify adequacy of bond.
- B. Child Support Statement from each natural person with an ownership interest (any %) in the company. (Pursuant to NRS 645A.025, required regardless of any support obligations.)
- C. Personal Disclosure Form (including an explanation of "Yes" answers) completed, signed and notarized for each owner of the company, each principal, officer, director, trustee, general partner and managing member of the company, and each person who has the power to direct the management and policy of the company.
- D. Completed, signed and notarized Non-Personal Disclosure Form (including an explanation of "Yes" answers) for the company and for any corporation that owns 25% or more of the applicant's voting stock.
- E. Copy of the surety bond required by NRS 645A.041.
- F. Copy of Certificate of Good Standing issued by the Nevada Secretary of State.
- G. **\$200.00** renewal fee payable to "Division of Mortgage Lending" or "State of Nevada." We understand that there is an additional 50% renewal fee of **\$100.00** should the renewal application not be received by the office of the Division of Mortgage Lending prior to the expiration of the company's license. NRS 645A.040(4).
- H. Escrow agencies must provide financial statements within 120 days of fiscal year end. NAC 645A.040(1). Renewal applications will not be processed if the applicant has failed to (i) submit applicable financial statements; and/or (ii) pay any fees owed.

2. Please complete the following:

Name(s) of Owner(s) of the Escrow Agency	Percentage of Interest Held (Must Equal 100%)
1.	%
2.	%
3.	%
4.	%

3. The current address(es) of the owner(s) of the Escrow Agency:

4. The following are the licensed Escrow Agents operating from the Escrow Agency and are also listed as principals on the Escrow Agency's surety bond:

5. The current address, phone number, fax number and e-mail address of the Escrow Agency are:

Street Address		
Nevada		
City	State	Zip
Phone Number: _____ (Must be a Local Land Line)		Fax Number: _____
E-Mail Address: _____ (Mandatory)		

I, the undersigned, state that I am authorized to sign the within application on behalf of the applicant named herein; that I have read and signed said application and know the contents thereof, and that the

statements made therein are true. By signing below and initialing each page, I represent that I personally have completed this application and verified the information contained herein.

APPLICANT'S SIGNATURE:

Name of Escrow Agency: _____

By: _____
Authorized Signatory (Principal or Owner)

Printed Name

Title

Subscribed and sworn to before me this _____ day of _____, 20____

Notary public in and for the County of _____, State of

My commission expires _____

Notary Signature _____

Notary Seal